

UNITED STATES COURT OF APPEALS  
FOR THE SECOND CIRCUIT

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August Term, 2008

(Argued: July 9, 2009)

Decided: December 15, 2009)

Docket No. 08-4197-pr

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RICHARD S.,

*Petitioner-Appellant,*

—v.—

SHARON CARPINELLO, RN, PhD, COMMISSIONER,  
NEW YORK STATE OFFICE OF MENTAL HEALTH,  
JAMES SPOONER, EXECUTIVE DIRECTOR,  
ST. LAWRENCE PSYCHIATRIC CENTER,

*Respondents-Appellees,*

Before:

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CALABRESI, HALL, *Circuit Judges*, SESSIONS,\* *District Judge*

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\* The Honorable William K. Sessions III, Chief Judge, United States District Court for the District of Vermont, sitting by designation.



1 acceptance of a plea or by verdict, to be not responsible by reason of mental disease or defect  
2 (“NRRMDD”). *Francis S. v. Stone*, 221 F.3d 100, 101 (2d Cir. 2000). Upon entry of a verdict  
3 of NRRMDD or acceptance of a plea of NRRMDD, the court orders a psychiatric examination  
4 and conducts an initial hearing to determine whether the acquittee is mentally ill<sup>1</sup> or is suffering  
5 from a dangerous mental disorder.<sup>2</sup> N.Y. Crim. Proc. Law § 330.20(2), (5), (6) (McKinney  
6 2005) (hereafter “CPL”). Based on the evidence at the initial hearing the NRRMDD acquittee  
7 receives one of three classifications. If the court finds that the NRRMDD acquittee has a  
8 dangerous mental disorder, it classifies the acquittee as “Track 1,” and must order commitment to  
9 a secure facility for an initial term of six months. *See* CPL § 330.20 (1)(f), (6). If the court finds  
10 that the NRRMDD acquittee is mentally ill but does not have a dangerous mental disorder, it  
11 classifies the acquittee as “Track 2,” and must issue an order of conditions<sup>3</sup> and an order

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<sup>1</sup> According to the statute, “mentally ill” means that a person “currently suffers from a mental illness for which care and treatment as a patient, in the in-patient services of a psychiatric center under the jurisdiction of the state office of mental health, is essential to [his] welfare and that his judgment is so impaired that he is unable to understand the need for such care and treatment.” N.Y. Crim. Proc. Law § 330.20(1)(d) (McKinney 2005).

<sup>2</sup> According to the statute, “dangerous mental disorder” means that a person “[i] currently suffers from a ‘mental illness’ as that term is defined in subdivision twenty of section 1.03 of the mental hygiene law, and (ii) that because of such condition he currently constitutes a physical danger to himself or others.” CPL § 330.20(1)(c). Section 1.03(20) of New York’s mental hygiene law defines “mental illness” as “an affliction with a mental disease or mental condition which is manifested by a disorder or disturbance in behavior, feeling, thinking, or judgment to such an extent that the person afflicted requires care, treatment and rehabilitation.” N.Y. Mental Hygiene Law § 1.03(20) (McKinney 2009).

<sup>3</sup> The statute defines “order of conditions” as “an order directing [the NRRMDD acquittee] to comply with this prescribed treatment plan, or any other condition which the court determines to be reasonably necessary or appropriate, and, in addition, where [the NRRMDD acquittee] is in custody of the commissioner, not to leave the facility without authorization.”

1 committing the acquittee to the custody of the state commissioner of mental health, pursuant to  
2 New York’s mental hygiene law. CPL § 330.20(7). If the court finds that the NRRMDD  
3 acquittee does not have a dangerous mental disorder and is not mentally ill, it classifies the  
4 acquittee as “Track 3,” and “must discharge the [individual] either unconditionally or subject to  
5 an order of conditions.” *Id.*; see also *In re David B.*, 766 N.E.2d 565, 570-71 (N.Y. 2002)  
6 (describing New York’s statutory scheme for involuntary commitment of insanity acquittees).

7 At the expiration of a six-month commitment order to a secure facility, the NRRMDD  
8 acquittee receives the first of a series of court reviews to determine his then current mental  
9 condition. If the court finds that the individual continues to have a dangerous mental disorder he  
10 must be recommitted under a first retention order for not more than one year. CPL §  
11 330.20(1)(g), (8). Second and subsequent reviews occur every two years. CPL § 330.20(1)(h),  
12 (9). If upon review a court finds that the NRRMDD acquittee no longer suffers from a dangerous  
13 mental disorder, it may direct transfer to a non-secure facility with an order of conditions if the  
14 individual is still mentally ill, or release with an order of conditions if the individual is no longer  
15 mentally ill. CPL § 330.20(11), (12). At any time during the period covered by an order of  
16 conditions, a court must conduct a hearing and issue an order of recommitment if it finds that the  
17 NRRMDD acquittee has a dangerous mental disorder. CPL § 330.20(14).

18 The NRRMDD acquittee may appeal by permission a commitment order, retention order  
19 or recommitment order to an intermediate state appellate court, and may appeal by permission a  
20 final decision to the Court of Appeals. CPL § 330.20(21).

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CPL § 330.20(1)(o).

1 II. Petitioner's History

2 From an early age, Richard S. was the victim of repeated severe physical, sexual and  
3 emotional abuse by his mother and his older brother. Between the ages of ten and eighteen he  
4 attempted suicide four times. At age 17, after his mother's death, he began to abuse alcohol and  
5 drugs. Later, after marriage, fatherhood and divorce, he began engaging in promiscuous and  
6 risky homosexual encounters.

7 In July 1980 Richard S. met a fifteen-year-old male, took him home and after a night of  
8 sexual relations, stabbed him three times in the chest with a pocket knife while the youth was  
9 sleeping. Richard S. turned himself in and was charged with several crimes, including attempted  
10 murder in the second degree. At the time of his arrest, he was on probation for manslaughter for  
11 the 1978 killing of another man whom he had stabbed to death after sex. He had no memory of  
12 engaging in any violence in the earlier case. His probation was revoked and he was incarcerated  
13 pending a competency hearing. He again attempted suicide.

14 Richard S. was found competent to stand trial. He then underwent psychiatric  
15 examination to determine his mental state at the time of the crime. All examining psychiatrists  
16 agreed that at the time of the stabbing, Richard S. lacked the capacity to appreciate the nature and  
17 consequences of his actions, and that he was in need of institutional treatment because of the  
18 danger he presented to himself and others. *In re David B.*, 766 N.E.2d at 569. Richard S. was  
19 adjudicated not guilty by reason of mental disease or defect, and committed to the custody of the  
20 Commissioner of Mental Health, pursuant to CPL § 330.20. *Id.* Based on the New York  
21 Supreme Court's findings, Richard S. was classified as "Track 1," and committed to a secure

1 facility in 1981. At the time of his initial commitment, Richard S. received a diagnosis of  
2 atypical psychosis, psychosexual disorder and substance abuse disorder. *Id.*

3 After a series of retention orders, the state Supreme Court in 1994 ordered Richard S.  
4 transferred to a non-secure facility because, although he remained mentally ill, he was no longer  
5 dangerously mentally ill. In 1996, based on allegations whose truth and significance is disputed,  
6 the state court ordered Richard S. returned to a secure facility under an emergency transfer order.

7 In 1998, the state Supreme Court again concluded that Richard S. no longer suffered from  
8 a dangerous mental disorder, but still qualified as mentally ill, and should be placed in a non-  
9 secure facility. *See id.* at 570. On appeal from the Appellate Division's affirmance of the  
10 hearing court's decision, the New York Court of Appeals first confirmed

11 that there is a constitutionally required minimum level of dangerousness to  
12 oneself or others that must be shown before an insanity acquittee may be retained  
13 in a non-secure facility, and that a finding that an individual is 'mentally ill' as  
14 defined under CPL 330.20(1)(d) contemplates a degree of dangerousness that  
15 satisfies due process concerns.

16  
17 *Id.* That minimum level of dangerousness "may be supported by evidence of violence," *id.* at  
18 572, but

19 [a]part from evidence of violence, retention of an insanity acquittee in a non-  
20 secure facility is justified where the State shows by a preponderance of the  
21 evidence that continued care and treatment are essential to the physical or  
22 psychological welfare of the individual and that the individual is unable to  
23 understand the need for such care and treatment. Retention also may be supported  
24 by the need to prepare for a safe and stable transition from non-secure  
25 commitment to release. Thus, in addition to recent acts of violence and the risk of  
26 harm to the defendant or others that would be occasioned by release from  
27 confinement, a court may consider the nature of the conduct that resulted in the  
28 initial commitment, the likelihood of relapse or a cure, history of substance or  
29 alcohol abuse, the effects of medication, the likelihood that the patient will  
30 discontinue medication without supervision, the length of confinement and

1 treatment, the lapse of time since the underlying criminal acts and any other  
2 relevant factors that form a part of an insanity acquittee's psychological profile.

3  
4 *Id.* On remand, in 2003 the state Supreme Court applied the *David B.* standard, and found that  
5 Richard S. was mentally ill and dangerous and required confinement in a non-secure facility.<sup>4</sup>  
6 *See In re Richard S.*, 776 N.Y.S.2d 604, 605 (N.Y. App. Div. 2004). The Appellate Division  
7 affirmed, concluding that Richard S. "meets all the criteria for retention in a nonsecure facility."  
8 *Id.* at 607. It found that the lower court's findings of mental illness and dangerousness were  
9 supported by a "strong preponderance of the credible evidence," and that the lower court  
10 implicitly concluded that Richard S. "is not cured, treatment is essential for his psychological  
11 welfare and the safety of others, and he is unable to comprehend the need for such treatment."  
12 *Id.* It rejected as "without merit" Richard S.'s contention that his continued confinement is  
13 improper absent a showing of "volitional impairment" or difficulty controlling his behavior. *Id.*  
14 The New York Court of Appeals dismissed Richard S.'s appeal of that decision. *In re Richard*  
15 *S.*, 818 N.E.2d 668 (N.Y. 2004) (table decision).

16 Richard S. filed a habeas corpus petition in the United States District Court for the  
17 Northern District of New York on December 6, 2004, challenging the state courts' failure to  
18 apply the United States Supreme Court's holding in *Kansas v. Crane* to his case. In addition he  
19 argued that he had established by clear and convincing evidence that he does not have serious  
20 difficulty in controlling his behavior. On March 17, 2008 the United States Magistrate Judge  
21 issued a Report and Recommendation recommending that the petition be denied and a certificate

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<sup>4</sup> Between 1998 and 2003 the Commissioner of Mental Health had sought two more subsequent retention orders, in October 2000 and October 2002. These proceedings were consolidated with the remand proceeding.

1 of appealability issue. The district court adopted the Report and Recommendation, and issued a  
2 certificate of appealability on October 24, 2008. *See Richard S. v. Carpinello*, 628 F. Supp. 2d  
3 286, 287 (N.D.N.Y. 2008) (order adopting report and recommendation); *Richard S. v.*  
4 *Carpinello*, No. 9:04cv1403 (N.D.N.Y. Oct. 24, 2008) (order granting certificate of  
5 appealability). The court found no merit in Richard S.’s argument that in order to confine an  
6 insanity acquittee, *Crane* requires the state to prove not only that he is mentally ill and  
7 dangerous, but also that he has serious difficulty controlling his behavior. Because the district  
8 court concluded that the state was not required to prove that Richard S. has serious difficulty  
9 controlling his behavior, it did not address his second argument in any detail, noting only that  
10 Richard S. had not rebutted by clear and convincing evidence the presumption that the state  
11 court’s factual determination was correct.

## 12 DISCUSSION

### 13 I. Standard of Review

14 We review de novo a district court’s decision to deny a petition for writ of habeas corpus.  
15 *E.g., Henry v. Ricks*, 578 F.3d 134, 137 (2d Cir. 2009). When a state court has adjudicated the  
16 merits of a petitioner’s claim, a federal court may grant an application for a writ of habeas corpus  
17 only if “the adjudication of the claim--(1) resulted in a decision that was contrary to, or involved  
18 an unreasonable application of, clearly established Federal law, as determined by the Supreme  
19 Court of the United States; or (2) resulted in a decision that was based on an unreasonable  
20 determination of the facts in light of the evidence presented in the State court proceeding.” 28  
21 U.S.C. § 2254(d); *see also, e.g., Brown v. Alexander*, 543 F.3d 94, 100 (2d Cir. 2008). Under

1 §2254(d)(1), a state-court decision is contrary to clearly established Supreme Court precedent if  
2 its “conclusion on a question of law is ‘opposite’ to that of the Supreme Court or if the state court  
3 decides a case differently than the Supreme Court’s decision ‘on a set of materially  
4 indistinguishable facts.’” *Id.* (quoting *Williams v. Taylor*, 529 U.S. 362, 413 (2000)). Richard S.  
5 concedes that the state courts’ decision was not contrary to clearly established federal law, but  
6 argues that it involved an unreasonable refusal to extend or apply clearly established federal law  
7 as determined by the Supreme Court in *Crane*.

8 A state court decision involves an unreasonable application of clearly established  
9 Supreme Court precedent if it correctly identifies the governing legal principle but unreasonably  
10 applies or unreasonably refuses to extend that principle to the facts of a particular case. *See*  
11 *Williams*, 529 U.S. at 413; *Ramdass v. Angelone*, 530 U.S. 156, 166 (2000); *accord Kennaugh v.*  
12 *Miller*, 289 F.3d 36, 45 (2d Cir. 2002); *see also Yarborough v. Alvarado*, 541 U.S. 652, 666  
13 (2004) (“Certain principles are fundamental enough that when new factual permutations arise,  
14 the necessity to apply the earlier rule will be beyond doubt.”) “[B]ear[ing] in mind that  
15 ‘unreasonable’ is not synonymous with ‘incorrect,’” *Serrano v. Fischer*, 412 F.3d 292, 297 (2d  
16 Cir. 2005), the “unreasonable application” standard requires “[s]ome increment of incorrectness  
17 beyond error . . . . [although] the increment need not be great.” *Francis S. v. Stone*, 221 F.3d  
18 100, 111 (2d Cir. 2000).

19 Under § 2254(d)(2), a state court’s determination of a factual issue is presumed to be  
20 correct, and the petitioner bears the burden of rebutting the presumption by clear and convincing  
21 evidence. 28 U.S.C. § 2254(e)(1); *see also, e.g., Brown*, 543 F.3d at 100.

1 II. Due Process Claim

2 The United States Supreme Court has long held that the Due Process Clause allows an  
3 insanity acquittee to be confined “as long as he is both mentally ill and dangerous, but no  
4 longer.” *Foucha v. Louisiana*, 504 U.S. 71, 77 (1992); accord *Jones v. United States*, 463 U.S.  
5 354, 368 (1983) (“The committed acquittee is entitled to release when he has recovered his  
6 sanity or is no longer dangerous.”). Although insanity acquittees may be initially committed  
7 based on a preponderance of the evidence rather than by clear and convincing evidence, see  
8 *Jones*, 463 U.S. at 367-68, with respect to the requirement that a state demonstrate both mental  
9 illness and dangerousness, the Supreme Court does not distinguish between civil commitment  
10 candidates and insanity acquittees. See *id.* at 368 (citing *O’Connor v. Donaldson*, 422 U.S. 563,  
11 575-76 (1975), a civil commitment case, in support of its holding that an insanity acquittee is  
12 entitled to release when he has recovered his sanity or is no longer dangerous).

13 In 1997 and 2002, the Supreme Court considered the constitutionality of civil  
14 commitment of dangerous sexual offenders under the Kansas Sexually Violent Predator Act, in  
15 *Kansas v. Hendricks*, 521 U.S. 346 (1997), and *Kansas v. Crane*, 534 U.S. 407 (2002). The  
16 Kansas act established procedures for the civil commitment of sexually violent predators,  
17 defined as persons who have “been convicted of or charged with a sexually violent offense and  
18 who suffer[] from a mental abnormality or personality disorder which makes [them] likely to  
19 engage in the [sic] predatory acts of sexual violence.” Kan. Stat. Ann. § 59-29a02(a) (1994); see  
20 *Hendricks*, 521 U.S. at 352.

21 In *Hendricks*, the Court noted that it had consistently upheld state involuntary

1 commitment statutes “when they have coupled proof of dangerousness with the proof of some  
2 additional factor, such as a ‘mental illness’ or ‘mental abnormality.’” 521 U.S. at 358. It  
3 reasoned that the statutory requirement of the existence of certain mental conditions that make  
4 one likely to engage in acts of sexual violence “serve[s] to limit involuntary civil confinement to  
5 those who suffer from a volitional impairment rendering them dangerous beyond their control.”  
6 *Id.* It concluded that the Kansas act “requires a finding of future dangerousness, and then links  
7 that finding to the existence of a ‘mental abnormality’ or ‘personality disorder’ that makes it  
8 difficult, if not impossible, for the person to control his dangerous behavior.” *Id.* The statutory  
9 requirement of a “mental abnormality” or “personality disorder” rendered the Kansas act  
10 consistent with the requirements of other statutes upheld by the Supreme Court “in that it  
11 narrows the class of persons eligible for confinement to those who are unable to control their  
12 dangerousness.” *Id.*

13 *Hendricks* thus did not limit the availability of involuntary commitment to those suffering  
14 from mental illness. If the individual has a mental abnormality or a personality disorder that  
15 renders him unable to control his dangerousness, thus linking his mental condition to a  
16 determination of future dangerousness, he may constitutionally be confined until his condition no  
17 longer causes him to be a threat to others. *Id.* at 363-64.

18 In *Crane*, the Supreme Court addressed the degree of inability to control one’s  
19 dangerousness that will satisfy substantive due process. The Court rejected the argument that a  
20 state must demonstrate complete lack of control, and it rejected the argument that a state need not  
21 make “any lack-of-control determination.” *Crane*, 534 U.S. at 412. Acknowledging that

1 inability to control one’s behavior is an imprecise concept, the Court deferred to the science of  
2 psychiatry and the will of the legislature to define the mental conditions that allow the state to  
3 seek involuntary commitment. *Id.* at 413. It held only that “in cases where lack of control is at  
4 issue, . . . there must be proof of serious difficulty in controlling behavior.” *Id.* Because the state  
5 high court had held that civil commitment under the Kansas act required a separate finding that  
6 an individual is unable to control his behavior, the United States Supreme Court vacated the  
7 judgment and remanded for further proceedings. *Id.* at 415.

8 A. Application of *Kansas v. Crane* to Insanity Acquittees

9 We address first the state’s contention that *Kansas v. Crane* does not govern due process  
10 standards for insanity acquittees. Although *Crane* and its predecessor *Hendricks* specifically  
11 addressed the involuntary commitment of two convicted sex offenders nearing the end of their  
12 prison sentences, the Kansas act applies not only to convicted sex offenders, but also to those  
13 who have been found incompetent to stand trial or not guilty because of a mental disease or  
14 defect. *See Hendricks*, 521 U.S. at 352 (describing the structure of the Kansas act’s civil  
15 commitment procedures).

16 The Supreme Court began its analysis of the constitutionality of the Kansas act by citing  
17 *Foucha*, an insanity acquittee case, for the general principle that an individual’s due process right  
18 to freedom from physical restraint may be overridden by a state’s provision for civil commitment  
19 of those “who are unable to control their behavior and who thereby pose a danger to the public  
20 health and safety.” *Id.* at 357. The Court noted that it had “consistently upheld *such* involuntary  
21 commitment statutes provided the confinement takes place pursuant to proper procedures and

1 evidentiary standards.” *Id.* (emphasis added). It endorsed generally the ability of state  
2 legislatures to define mental health terms that will have legal significance, *see id.* at 359, as long  
3 as the statutes “limit involuntary civil confinement to those who suffer from a volitional  
4 impairment rendering them dangerous beyond their control.” *Id.* at 358.

5 In *Crane*, the Supreme Court explained that this “lack of control” meant “proof of serious  
6 difficulty in controlling behavior.” *Crane*, 534 U.S. at 413. Again it cited to *Foucha* as it  
7 distinguished civil commitment of the dangerous individual with a serious mental illness,  
8 abnormality or disorder from the “dangerous but typical recidivist convicted in an ordinary  
9 criminal case.” *Id.* It summarized its approach to establishing constitutional safeguards in the  
10 general area of mental illness as “proceeding deliberately and contextually, elaborating generally  
11 stated constitutional standards and objectives as specific circumstances require.” *Id.* at 414.

12 *Crane* elaborated on the general constitutional standard for civil commitment in the  
13 context of the Kansas act, which provided for civil commitment of those convicted of or charged  
14 with sexually violent acts. The Supreme Court did not change the standard for involuntary  
15 commitment. *See Varner v. Monahan*, 460 F.3d 861, 864 (7th Cir. 2006) (commenting that  
16 *Crane* did not disturb the Supreme Court’s holding that persons with mental defects and  
17 dangerous proclivities may constitutionally be civilly committed). Nor did the Supreme Court’s  
18 decision in *Crane* create a constitutional distinction between sentenced offenders and insanity  
19 acquittees. In essence, *Crane* and *Hendricks* rephrased the general constitutional standard for  
20 civil commitment of insanity acquittees and other candidates for civil commitment to clarify that  
21 proof of mental illness embraces proof of a mental condition that makes it difficult to control

1 one's dangerous behavior. *Hendricks*, 521 U.S. at 358; *Crane*, 534 U.S. at 413. There is no  
2 justification for the contention that the Supreme Court meant this standard to apply only to  
3 convicted sex offenders, given the broad coverage of the Kansas act and the broad context of the  
4 Court's discussion. The district court thus erred when it concluded that *Crane* does not apply to  
5 insanity acquittees. See *Richard S.*, 628 F. Supp. 2d at 293.

6 B. Requirement of a Separate Finding of Inability to Control Behavior

7 Next we address Richard S.'s contention that *Crane* refined the constitutional standard  
8 for his continued involuntary commitment by requiring the state to prove that he has serious  
9 difficulty in controlling his dangerous behavior. The district court viewed *Crane* as having  
10 mandated an additional due process requirement for involuntary confinement pursuant to  
11 sexually violent predator statutes, specifically that a state must also prove that the alleged  
12 predator has serious difficulty in controlling behavior. *Id.* This too was error. By far the  
13 majority of state high courts and circuit courts of appeal that have examined the *Crane* decision  
14 have concluded that the Supreme Court did not add a factor to the due process test for  
15 involuntary commitment. See *Varner*, 460 F.3d at 864 ("Once a jury has found mental illness  
16 and a likelihood of future offenses, it has drawn the line [between civil commitment and the  
17 criminal law] the Court thought essential."); *Laxton v. Bartow*, 421 F.3d 565, 572 (7th Cir. 2005)  
18 (holding that *Crane* did not "clearly establish[] that the jury must be instructed and specifically  
19 find that petitioner has serious difficulty in controlling his behavior"); *In re Leon G.*, 59 P.3d  
20 779, 786 (Ariz. 2002) (holding that *Crane* did not alter the *Hendricks* analysis "that focused on  
21 the link between proof of dangerousness and proof of mental abnormality"); *People v. Williams*,

1 74 P.3d 779, 790 (Cal. 2003) (“[*Crane*] does not compel us to hold that further lack-of-control  
2 instructions or findings are necessary to support a commitment under [California’s Sexually  
3 Violent Predators Act].”); *State v. White*, 891 So. 2d 502, 509-510 (Fla. 2004) (“While *Crane*  
4 requires proof of serious difficulty in controlling behavior, the proof *Crane* requires is not proof  
5 *in addition to* that already required under [Florida’s sexually violent predator] statute.”) (internal  
6 quotation marks omitted); *In re Detention of Varner*, 800 N.E.2d 794, 798 (Ill. 2003) (holding  
7 that *Crane* does not require a specific determination by the fact finder that a person lacks  
8 volitional control); *In re Dutil*, 768 N.E.2d 1055, 1064 (Mass. 2002) (“As long as the  
9 [Massachusetts] statute requires a showing that the prohibited behavior is the result of a mental  
10 condition that causes a serious difficulty in controlling behavior, the statute meets due process  
11 requirements.”); *In re Vantreece*, 771 N.W.2d 585, 587-88 (N.D. 2009) (holding that the due  
12 process requirement of serious difficulty in controlling behavior is part of the definition of  
13 sexually dangerous individual, which requires a nexus between the mental disorder and the  
14 dangerousness); *In re Treatment & Care of Luckabaugh*, 568 S.E.2d 338, 348 (S.C. 2002)  
15 (“*Crane* does not mandate a court must separately and specially make a lack of control  
16 determination, only that a court must determine the individual lacks control while looking at the  
17 totality of the evidence.”); *In re Detention of Thorell*, 72 P.3d 708, 715-16 (Wash. 2003) (en  
18 banc) (“*Crane* requires a determination that a potential SVP has serious difficulty controlling  
19 dangerous, sexually predatory behavior, but does not require a *separate* finding to that effect.”);  
20 *In re Commitment of Laxton*, 647 N.W.2d 784, 787 (Wis. 2002) (“[A] civil commitment does not  
21 require a separate finding that the individual’s mental disorder involves serious difficulty for

1 such person to control his or her behavior.”). *But see In re Detention of Barnes*, 658 N.W.2d 98,  
2 101 (Iowa 2003) (holding that to justify civil commitment, the jury must be instructed that the  
3 person’s mental condition must cause serious difficulty in controlling behavior); *In re Thomas*,  
4 74 S.W.3d 789, 792 (Mo. 2002) (en banc) (requiring a jury instruction defining mental  
5 abnormality to include serious difficulty in controlling behavior); *In re Commitment of W.Z.*, 801  
6 A.2d 205, 219 (N.J. 2002) (holding that for involuntary commitment under the state’s sexually  
7 violent predators act, the state must prove an additional requirement “that the individual has  
8 serious difficulty controlling his or her harmful sexual behavior such that it is highly likely that  
9 the person will not control his or her sexually violent behavior and will reoffend”).

10 We agree with the majority of courts that have addressed this issue. The Supreme Court  
11 neither strayed from nor expanded its core holding: for involuntary commitment to withstand due  
12 process scrutiny, a state must prove mental illness and dangerousness. *Foucha*, 504 U.S. at 75-  
13 76. *Hendricks* and *Crane* provided an explanation of the mental illness portion of the test: the  
14 state may satisfy this component by proving that an individual has a mental condition,  
15 abnormality or disorder that is sufficiently severe that he has serious difficulty in controlling his  
16 dangerous behavior. *See Crane*, 534 U.S. at 413.

17 To the extent then that Richard S. argues that *Crane* requires a specific finding with  
18 respect to lack-of-control, we do not find support for his position in the Supreme Court’s  
19 decision. Moreover, to the extent that other courts may have determined that *Crane* added to or  
20 changed the state’s proof in involuntary commitment cases, the law is not “clearly established,”  
21 as determined by the Supreme Court, and will not afford Richard S. habeas relief. *See Laxton*,

1 421 F.3d at 572 (holding that, given the Supreme Court’s acknowledgment that bright-line rules  
2 concerning a lack-of-control element are inappropriate, *Crane* did not clearly establish a separate  
3 finding requirement).

4 Richard S. also argues that the state failed to demonstrate that he currently has a mental  
5 condition that makes it difficult to control his dangerousness. He contends that future  
6 dangerousness cannot continue to be presumed based on his original adjudication of not guilty by  
7 reason of mental disease or defect, a point with which we do not disagree. The state, however,  
8 has sought periodic review of Richard S.’s retention, as required by statute. *See*  
9 CPL § 330.20(8), (9). Most recently, in support of retention the state presented evidence that  
10 Richard S. “has a very complex psychiatric condition and currently meets the criteria for four  
11 intertwined disorders: sexual sadism, gender identity disorder, antisocial personality disorder  
12 and borderline personality disorder.” *In re Richard S.*, 776 N.Y.S.2d at 605. According to one  
13 of his treating psychiatrists, Richard S.’s sexual sadism, deemed his most dangerous condition,  
14 “is a chronic condition which usually worsens over time and is difficult or perhaps impossible to  
15 fully treat.” *Id.* at 605-06. The psychiatrist also indicated that Richard S. “has refused the use of  
16 objective measures to evaluate his condition, is not open to treatment for it and denies that he is a  
17 sexual sadist.” *Id.* at 606. Another psychiatrist agreed that there had been no progress in  
18 treatment because Richard S. denied that he was a sexual sadist. *Id.* Richard S.’s diagnoses have  
19 also included poly-substance abuse in institutional remission. The psychiatrists expressed  
20 concern that Richard S. has never participated in a substance abuse treatment program, and that  
21 substance abuse may be associated with triggering sadistic impulses, even if consciously

1 suppressed or controlled. *Id.*

2 Richard S. offered contrary expert evidence as to his mental condition, *id.* at 606-07, but  
3 the Appellate Division concluded: “Taking into account all the expert opinions in the record, . . .  
4 County Court’s findings of a mental illness and dangerousness are supported by a strong  
5 preponderance of the credible evidence,” and therefore Richard S. was appropriately retained in a  
6 nonsecure facility. *Id.* at 607.

7 The state courts made no explicit finding that Richard S. currently lacked an ability to  
8 control his dangerous behavior. *See id.* A fair reading of *Crane*, however, requires no explicit  
9 finding, as long as the evidence presented proves “serious difficulty in controlling behavior.”  
10 *Crane*, 534 U.S. at 413. Proof of a mental disorder or abnormality that makes it seriously  
11 difficult to control one’s dangerous behavior will satisfy the mental illness factor for involuntary  
12 commitment. *Id.*; accord *Hendricks*, 521 U.S. at 358.

13 The state courts found that Richard S. continues to suffer from a complex and serious  
14 mental disorder for which he refuses to receive treatment because he denies that he suffers from  
15 the disorder. From these facts the state court concluded that Richard S. is unable to understand  
16 his need for treatment, *see In re Richard S.*, 776 N.Y.S.2d at 607; *see also* CPL § 330.20(1)(d)  
17 (“‘Mentally ill’ means that a defendant currently suffers from a mental illness for which care and  
18 treatment . . . is essential to such defendant’s welfare and that his judgment is so impaired that he  
19 is unable to understand the need for such care and treatment. . . .”). Richard S. does not here  
20 dispute that he currently suffers from mental illness as that term is defined in  
21 CPL § 330.20(1)(d), nor that his dangerousness stems from his mental illness. The hearing

1 testimony further established that without treatment Richard S. may be unable or unwilling to  
2 recognize or to avoid the circumstances that prompt him to engage in dangerous and potentially  
3 homicidal behavior. The state courts therefore found the link that *Hendricks* and *Crane* require,  
4 between an individual's mental condition and a lack of ability to control one's dangerousness.  
5 Their decision that Richard S. remained mentally ill and dangerous because of that inability to  
6 control was not an unreasonable application of clearly established federal law.

7 C. Serious Difficulty in Controlling Behavior

8 Richard S.'s remaining argument, that the evidence failed to establish a *serious* difficulty  
9 in controlling behavior, *see Crane*, 534 U.S. at 413, asks us to find that the state courts' decision  
10 was based on an unreasonable determination of the facts in light of the evidence presented. He  
11 dismisses as irrelevant the evidence concerning his lack of insight into his illness, his history of  
12 drug and alcohol abuse and refusal to obtain treatment, and his violation of facility rules. He  
13 stresses evidence that he has demonstrated an ability to control any dangerous impulses over  
14 more than twenty years of confinement. Assuming that this evidence carries some, perhaps even  
15 substantial, weight in determining whether Richard S. has a mental condition that makes it  
16 seriously difficult for him to control his dangerous behavior, it fails to rebut by clear and  
17 convincing evidence the state courts' findings. *See, e.g., Majid v. Portuondo*, 428 F.3d 112, 125  
18 (2d Cir. 2005) ("In habeas proceedings, 'a determination of a factual issue made by a State court  
19 shall be presumed to be correct' and the petitioner 'shall have the burden of rebutting the  
20 presumption of correctness by clear and convincing evidence.'" (quoting § 2254(e)(1)).

21 The Supreme Court recognized that *Hendricks* as explained by *Crane* did not provide a

1 precise constitutional standard for evaluating an inability to control one’s dangerous behavior.  
2 *See Crane*, 534 U.S. at 413. The Court preferred instead to “proceed[] deliberately and  
3 contextually, elaborating generally stated constitutional standards and objectives as specific  
4 circumstances require.” *Id.* at 414. A state court that has made the constitutionally requisite  
5 determination of mental illness linked to dangerousness has not unreasonably applied clearly  
6 established federal law, nor has it made an unreasonable determination of the facts. Even if we  
7 would require more or different proof of serious difficulty in controlling behavior, relief is not  
8 available under § 2254. *See, e.g., Varner*, 460 F.3d at 864 (“Where . . . a person’s difficulty in  
9 controlling his behavior must fall remains open to decision one case at a time, and this implies  
10 the absence of a ‘clearly established’ rule that the state judiciary could transgress.”).

11 Accordingly, although the district court erred in concluding that *Kansas v. Crane* did not  
12 apply to insanity acquittees, the state courts did not unreasonably apply clearly established  
13 federal law with respect to the involuntary commitment of Richard S., nor did they unreasonably  
14 determine the facts with respect to his mental illness and its link to his dangerousness.

## 15 CONCLUSION

16 The denial of petitioner’s application for a writ of habeas corpus is affirmed.